

DECLARATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or the below named inventors are the original, first and joint inventors (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **METHOD AND APPARATUS FOR PROGRAMMABLE FLUIDIC PROCESSING**, the Specification of which:

- ☐ is attached hereto.
☒ was filed on **February 12, 1999** as Application Serial No. **09/249,955**.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability of the subject matter claimed in this application, as "materiality" is defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose all information known to me to be material to patentability of the subject matter claimed in this application, as "materiality" is defined in Title 37, Code of Federal Regulations, § 1.56, which become available between the filing date of the prior application and the national or PCT international filing date of this application:

N/A

(Application Serial No.)	(Filing Date)	(Status)
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(Application Serial No.)	(Filing Date)	(Status)
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I hereby direct that all correspondence and telephone calls be addressed to Steven L. Highlander, Arnold White & Durkee, P.O. Box 4433, Houston, Texas 77210, (512) 418-3000.

I HEREBY DECLARE THAT ALL STATEMENTS MADE OF MY OWN KNOWLEDGE ARE TRUE AND THAT ALL STATEMENTS MADE ON INFORMATION AND BELIEF ARE BELIEVED TO BE TRUE; AND FURTHER THAT THESE

STATEMENTS WERE MADE WITH THE KNOWLEDGE THAT WILLFUL FALSE STATEMENTS AND THE LIKE SO MADE ARE PUNISHABLE BY FINE OR IMPRISONMENT, OR BOTH, UNDER SECTION 1001 OF TITLE 18 OF THE UNITED STATES CODE AND THAT SUCH WILLFUL FALSE STATEMENTS MAY JEOPARDIZE THE VALIDITY OF THE APPLICATION OR ANY PATENT ISSUED THEREON.

Inventor's Full Name:	Fredrick	F.	Becker
Inventor's Signature:	<i>Fredrick F. Becker MD</i>		
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Post Office Address: (if different from above)			

Inventor's Full Name:	Peter		Gascoyne
Inventor's Signature:	<i>Peter Gascoyne</i>		
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Residence Address: (street, number, city, state, and/or country)	5313 Huisache St. Bellaire, Tx - 77401		
Post Office Address: (if different from above)			

Inventor's Full Name:	Xiaobo		Wang
Inventor's Signature:	<i>Xiaobo Wang</i>		
Country of Citizenship:	CHINA	Date:	4/5/99
Residence Address: (street, number, city, state, and/or country)	4910 winding River Drive, Sugarland TX 77478		
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Inventor's Full Name:	Jody	VALENTINE	Vykoukal
Inventor's Signature:	Jody Vykoukal		
Country of Citizenship:	USA	Date:	4/5/99
Residence Address: (street, number, city, state, and/or country)	1937 DRYDEN NO. 2 HOUSTON TEXAS 77030		
Post Office Address: (if different from above)			

Inventor's Full Name:	Giovanni		De Gasperis
Inventor's Signature:			
Country of Citizenship:		Date:	
Residence Address: (street, number, city, state, and/or country)			
Post Office Address: (if different from above)			

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Inventor's Full Name:	Frederick	F.	Becker
Inventor's Signature:			
Country of Citizenship:		Date:	
Residence Address: (street, number, city, state, and/or country)			
Post Office Address: (if different from above)			

Inventor's Full Name:	Peter		Gascoyne
Inventor's Signature:			
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Residence Address: (street, number, city, state, and/or country)			
Post Office Address: (if different from above)			

Inventor's Full Name:	Xiaobo		Wang
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Inventor's Signature:			
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Inventor's Full Name:	Giovanni		De Gasperis
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